



City of Lodi Discount Program Application

(209)-333-6719

www.lodi.gov

application date _____

Do not complete application type: ☐ (1) Bk Yd Ref ☐ (3) Share ☐ (4) Senior Fixed Inc
City Use Only ☐ (2) MH Share ☐ (4) Fixed Inc

Application Status: ☐ Add new ☐ Drop ☐ Re-certify ☐ Move ☐ Change _____

Please mail application and documentation to: The City of Lodi-Revenue Dept
310 W Elm St
Lodi CA 95240

Customer Information

Account number _____ Customer name _____

Number in household _____ Daytime phone _____

Service address _____

Mailing address _____

Total income (from SHARE or Fixed income worksheet, if applying for discounts) \$ _____ Signature _____

DECLARATION:

By signing this application, I certify under penalty of perjury that the information provided on this application is true and correct under the laws of the State of California. I understand that the City of Lodi reserves the right to request verification of continued economic need at any time and I will notify the City of Lodi Finance Department of any changes that affect my eligibility. I understand that the City of Lodi has the right to re-bill me at the applicable rate if appropriate. I understand that this information may be shared with my other energy utility, if applicable. Should you qualify, your discount will appear as soon as practicable after the completed application has been received and verified. Upon application you agree to make even budgeted monthly payments and one uneven payment in the reconciliation month as designated. The City of Lodi will occasionally contact you to verify your need for the program hasn't changed.

(1) Backyard service

☐ I am disabled and need "backyard" service. The trash collector will roll my carts to the truck. No other person in my household is capable of moving the carts to the curb. Please attach appropriate proof of disability such as statement from your physician or any card / letter identifying you as a disabled person.

(2) Manager / landlord information (Mobile Homes Only)

Account # _____ Manager/Landlord name _____

Manager Phone Number _____ Name on City Bill _____

Service Address _____

SHARE Income Guidelines

Your household income must not exceed the SHARE income guidelines

Number of persons in household	Maximum annual household income
1	\$24,867
2	\$32,518
3	\$40,170
4	\$47,822
5	\$55,473
6	\$63,125
7	\$64,559
8	\$65,994

(3,4) proof of income worksheet*

Gross Yearly Fixed Income of Household		Gross Yearly Non-Fixed Income of Household	
AFDC / TANF	_____	Wages/Commissions	_____
Food stamps	_____	Stocks/Bond Income	_____
SSI / SSP	_____	Business Income	_____
SSA	_____	All Other Income	_____
Pensions/Annuity/401K/IRA	_____	Total Non-Fixed Income	(B) _____
Interest Income	_____		
Total Fixed Income (sum above)	_____	(A)	
Total Annual Income (add A & B)		_____	

Senior Fixed Income Guidelines

Use worksheet above to complete this section

Total Annual Income (add A & B) _____ (must be less than \$45,000 to Qualify)

Line Above x 80% _____ (Line A must be greater than this line)

Income Requirements

SHARE/SENIOR FIXED INCOME - "Gross Yearly Household Income" means all money and non-cash benefits available for living expenses from all sources, both taxable and nontaxable, before deductions for all people who live in my home. This includes but is not limited to: Wages, salaries and commissions; Self-Employment; Child/Spousal support; Interest dividends or withdrawals from savings accounts, stocks and bonds or retirement accounts such as IRA and 401 K accounts; Stocks; Bonds; Business or rental income, support from family or friends; Cash gifts, loans; Lottery winnings; Tax refunds and money from insurance policies or legal settlements; Social Security; Retirement, veterans, disability or unemployment benefits and workers compensation; AFDC; SSI; SSP; Cash public assistance; Food stamps and free housing or utilities; School grants, loans, scholarships or other aid.

The City of Lodi will use documentation you provide to determine whether your household qualifies under the guidelines listed above. You MUST submit CURRENT PROOF OF INCOME for everyone receiving money in your household. Your application is considered incomplete without this documentation. The City of Lodi will contact you for updated income information if your documentation is incomplete or not current. Examples of documentation you can submit as proof of your household income:

Agency Assistance – intake documentation from local agency showing household income and agency information
 AFDC – Notice of action; Computer Printout; Benefit letter; Copy of current check
 Child and/or Spousal Support – Copy of current check
 Disability Compensation – Copy of current check; Printout from agency or insurance agency verifying amount
 Federal Tax – Form 1040 and accompanying worksheets (Schedule C, F and Form 2555); Forms W-2 for all wage earners
 General Assistance – Notice of action from County Social Services; Copy of current check
 Interest Income – Monthly or quarterly bank statement; Statement of income from bank or agency
 Paycheck stubs – Current stub(s) covering at least two months and showing gross income
 Pension and annuities – Copies of current check
 Self-Employed – Federal Tax Forms 1040 and Schedule C; Two recent bank statements showing personal income
 Social Security – Copy of current check(s); Notification from bank of direct deposit
 Supplemental Security Income – Notice of planned action; Notification from bank of direct deposit
 Supplemental Security Payments – Notice of planned action; Notification from bank of direct deposit
 Student Aid – Financial aid statement from College or University
 Support from an individual – Copy of current check and statement signed by person providing support
 Unemployment benefits – Copy of current check; Printout from Employment Development Department
 Veteran's Benefits – A letter indicating receipt of Veteran's pension; Copy of current VA check
 Other sources of income – Documentation of other money received by your household and used to pay monthly bills